

## **Financial Assistance Policy Summary**

### **What Financial Assistance Is:**

Millinocket Regional Hospital (MRH) provides eligible patients partially or fully-discounted emergent or medically necessary hospital care. This is called “Free Care” when the care is fully discounted. Financial Assistance is based on the Federal Government’s Federal Poverty Guidelines. If you believe you may be eligible for Financial Assistance, you must fill out a Financial Assistance application.

### **How you can apply for Financial Assistance:**

You can find Financial Assistance applications and income guidelines at any place you register for services at MRH. You can also call our Patient Financial Services Offices at 207-723-3369 or 207-723-7247 and ask them to mail you an application, or, you can go to our website, [www.mrhme.org](http://www.mrhme.org), and download the forms.

When filling out your application it is important that you complete all information to the best of your ability. You will be asked basic information about yourself and your family members, and you will be asked to provide documentation to verify family income. This information is confidential and is only used for the purpose of determining your discount. If you report no family income, we will also need to know how you meet your daily needs.

You can return your application by mail to MRH at 200 Somerset Street, Millinocket, Maine, 04462, or by bringing it to the Hospital’s registration desk or to the Financial Counselor’s office at the office building next to MRH Family Medicine.

### **Determination of Financial Eligibility:**

Generally, patients are eligible for full or partial Financial Assistance when their Family Income is at or below 200% of the Federal Government’s Federal Poverty Guidelines. Eligibility for Financial Assistance means that Eligible Persons will have their care covered fully or partially and they will not be charged more for emergency or other medically necessary care than amounts generally billed to insured persons.

Less than 150% Federal Poverty Guidelines	100% Discount
150%-200%	50% Discount

This policy only applies to services billed by Millinocket Regional Hospital and its Provider-Based Physicians. You may be separately billed by other service providers, such as physicians or laboratories, to which this policy does not apply. You should contact those providers directly about your bill.

Only medically necessary care is eligible under the Financial Assistance Policy.

**If you need help or more information, please call us at 207-723-3369 or 207-723-7247.**